MAR 1 5 1975

	(name	*
eing the next-of-	kin of	, do
	(nam	9)
ereby authorize t	he disinterment and examina	tion of the remains of my
.2		
ite Litt	1	, under
(relation	nship)	(name)
e direction of the	e Center for Human Radiobio	logy of the Argonne National
aboratory, 9700 S	South Cass Avenue, Argonne	, Illinois 60439, or its
cientific success	ors, such disinterment and	examination to be for the
urposes of advance	cing medical and scientific	research and education. I
	mortation of said complete	Argonno Mational Tabouatous
utnorize the trans	portation of said remains to	Argonne National Laboratory
a the nurses of	commission out such our minorial	on and to rotain such house
or the purpose of	carrying out such examination	on and to retain such bone
nacimons as the s	rainstific norconnol may do	em fit. Following examination,
pecimens as the s	scientific personner may dec	in the Pollowing examination,
on romains will be	returned for reinterment	The grave site will be restored
ie tematiis witt be	returned for reinterment.	the grave site will be restored
its original cond	lition after disinterment and	again after reinterment. All
o		
e above procedur	es will be accomplished at	no cost to me.
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